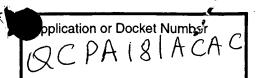
PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000



CLAIMS AS FILED - PART I (Column 1)				(Column 2) TYPE			LL ENTITY		OTHER THAN SMALL ENTITY			
TOTAL CLAIMS						(Column 2)				OR		
			ב	5				RATE	FEE		RATE	FEE
			NUMBER F	ILED	ED NUMBER EX			BASIC FEE	355.00	OR	BASIC FEE	· 710.00
TOTAL CHARGEABLE CLAIMS 5				nus 20= *		<u></u>		X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS 3 =					1	Į.		X40=		OR	X80=	
MULTIPLE DEPENDENT CLAIM PRESENT								+135=		OR	+270=	
* If the difference in column 1 is less than zero, enter "0" in column 2						Ļ	TOTAL		OR	TOTAL	710.07	
CLAIMS AS AMENDED - PART II								•		i	OTHER	
		(Column 1)		(Colu	mn 2)	(Column 3)		SMALL E	ENTITY	OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDM	Total	· 23	Minus	** 2	0	= 3		X\$ 9=		OR	X\$18=	54
AME	Independent	٠ 5	Minus		3	= 2		X40=		OR	X80=	168
<u> </u>	FIRST PRESE	NTATION OF M	ULTIPLE DEF	ENDEN	I CLAIM		'	+135=		OR	+270=	
								TOTAL		OR	TOTAL	PAIN
(Column 1) (Column 2) (Column 3)								ADDIT. FEE		, ,	ADDIT. FEE	71112
		(Column 1) CLAIMS			HEST	(Column 3)	1 г		ADDI-			ADDI-
AMENDMENT B		REMAINING AFTER AMENDMENT		PREVI	MBER OUSLY FOR	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE
NDM	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***		= .		X40=		OR	X80=	
L	FIRST PRESE	NTATION OF M	ULTIPLE DEF	ENDEN	I CLAIM		┚╽	+135=	» 	OR	+270=	
							L	TOTAL			TOTAL	
							4	ADDIT. FEE		OR	ADDIT. FEE	<u> </u>
_		(Column 1)			mn 2)	(Column 3)	. _					
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUN PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=] [X\$ 9=	-	OR.	X\$18=	,
AME	Independent	*	Minus	***		=	 	X40=		OR	X80=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM										070	<u> </u>
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								+135=		OR	+270=	
**	** If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.									OR x in co		

PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2001 9/85/1655											
CLAIMS AS FILED - PART I (Column 1) (Column 2)					SMALL ENTITY TYPE C			OTHER THAN SMALL ENTITY			
TOTAL CLAIMS							RAT	E FEE	٦	RATE	FEE
FOR TUEB			NUMBER FILED		NUMBER EXTRA		BASIC		OR	BASIC FEE	
TOTAL CHARGEABLE CLAIMS			23 minus 2002		*		X\$ 9)=	OR	X\$18=	
INE	DEPENDENT C	LAIMS	5 m	inus =	*	/-	X42	=	OR	X84=	
ML	MULTIPLE DEPENDENT CLAIM PRESENT						+140	=	OR	+280=	
* If	the difference	in column 1 is	less than ze	ero, enter	r "0" in c	column 2	TOTA		OR	TOTAL	
	C	LAIMS AS A	MENDE) - PAR	T II			<u> </u>		OTHER	THAN
		(Column 1)	N. Turke Mr. manager	(Colur		(Column 3)	SMALL ENTITY OR SMALL ENTITY				
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER DUSLY	PRESENT EXTRA	RATE	ADDI- E TIONA FEE		RATE	ADDI- TIONAL FEE
NDN	Total	*	Minus	**		=	X\$ 9	=	OR	X\$18=	
AME	Independent	* ENTATION OF MU	Minus	***	CLAINA	=	X42=	=	OR	X84=	
<u> </u>	FINOT PRESE	ENTATION OF MIC	JLIIPLE DER	PENDENI	CLAIM		+140:	=.	OR	+280=	
					TOT ADDIT, F		Ⅎᇧ	TOTAL ADDIT. FEE			
	(Column 1) (Column 2) (Column 3)						ADDII. F	CC		ADDII. FEET	
ENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER DUSLY	PRESENT EXTRA	RATE	ADDI- TIONAI FEE		RATE	ADDI- TIONAL FEE
NDA	Total	*	Minus	**		=	X\$ 9=	=	OR	X\$18=	
AME	Independent	* NTATION OF MU	Minus	***	CLAINA	=	X42=	:	OR	X84=	
L	THIOTTHESE	MINITON OF MIC	CHELE DEF	ENDENT	CLATIVI		+140=	=	OR	+280=	
							TOT. ADDIT. FE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colun		(Column 3)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			ADDIT: LL	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID I	BER OUSLY	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total	*	Minus	**		=	X\$ 9=	:	OR	X\$18=	
AME	Independent	* NTATION OF MU	Minus	***	CLAIM	=-	X42=		OR	X84=	
	TINOTFILOL	MATION OF MC	CTIPLE DEF	CINDEIN	CLAIN		+140=		OR	+280=	
*](**]	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."						TOTA	AL .	- '	TOTAL	
***	f the "Highest Nu	mber Previously Pa aber Previously Paid	id For" IN THI	S SPACE is	s less tha	n 3, enter "3."	ADDIT. FE		_ ′	ADDIT. FEE	

lication or Docket Number

UNITED STATES PATENT & TRADEMARK OFFICE Washington, D.C. 20231

REQUEST FOR FATENT FEE REFUND								
1 Date of Request: 7-28-03 2 Serial/Patent # 09/851.655								
3 Ple	ease refund the following fee(s);	4 PAPER NUMBER	5 DATE FILED	6 AMOUNT				
	Filing			\$				
	Amendment			\$				
X	Extension of Time	12	7/21/03	\$ 930 00				
•	Notice of Appeal/Appeal		·	\$				
	Petition			\$				
	Issue			\$				
	Cert of Correction/Terminal Disc.			\$				
	Maintenance			\$				
	Assignment			\$				
	Other			\$				
		7 TOTAL AMOUNT S 930						
		8 TO BE REFUNDED BY:						
10 RE	ASON:	Treasury Check						
	Overpayment	Credit Deposit A/C #:						
	Duplicate Payment 9 17 0026							
X	No Fee Due (Explanation):							
	annecessary							
	/							
11 REFUND REQUESTED BY:								
TYPED/PRINTED NAME: WAN LAYMON TITLE: Pld. Exam.								
SIGNATURE: War Jung PHONE:								
OFFICE:								
THIS SPACE RESERVED FOR FINANCE USE ONLY: APPROVED: DATE: 7/29/63								

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance Refund Branch Crystal Park One, Room 802B